DOCUMENT RESUME

ED 427 006 SP 038 309

TITLE	Comprehensive Teacher Education: A Handbook of Knowledge.
INSTITUTION	American Association of Colleges for Teacher Education, Washington, DC.
SPONS AGENCY	DeWitt Wallace/Reader's Digest Fund, Pleasantville, NY.
ISBN	ISBN-0-89333-151-1
PUB DATE	1999-00-00
NOTE	38p.
AVAILABLE FROM	AACTE Publications, 1307 New York Avenue, N.W., Suite 300, Washington, DC 20005-4701; Tel: 202-293-2450; Fax: 202-457-8095; Web site: www.aacte.org (AACTE members $15; nonmembers $20).
PUB TYPE	Reports - Descriptive (141)
EDRS PRICE	MF01/PC02 Plus Postage.
DESCRIPTORS	Educational Change; Educational Improvement; Elementary Secondary Education; Higher Education; Knowledge Base for Teaching; *Preservice Teacher Education; Student Characteristics; *Teacher Competencies; Teacher Qualifications
IDENTIFIERS	*Psychosocial Factors; Teacher Knowledge

ABSTRACT

Since 1992, AACTE and the DeWitt Wallace-Reader's Digest Fund have worked in partnership to advance the knowledge base of comprehensive teacher education. The AACTE/DeWitt Wallace-Reader's Digest Fund's Comprehensive Teacher Education National Demonstration Project is grounded in the mutual belief that preparation of classroom teachers must consider not only the academic needs of students but also their human needs and varied societal circumstances. The project incorporates knowledge of health and human services in the training of prospective and practicing teachers. The results of this partnership, operationalized as four demonstration models at geographically diverse universities, are represented in this publication. The publication discusses the current context of education, including disadvantaged students, school-based services, the national reform context, and the collaborative imperative. After providing an overview of the National Demonstration Project, the publication describes each of the four sites: (1) the Wellness Project at the University of Louisville; (2) the Training for Interprofessional Collaboration Project at the Human Services Policy Center of the University of Washington, Seattle; (3) Project TEACH at the School of Education of Jackson State University in Jackson, Mississippi; and (4) the Interdisciplinary Collaboration Training Project at the College of Education, University of New Mexico, Albuquerque. (Contains 35 references.) (SM)

****
* Reproductions supplied by EDRS are the best that can be made *
* from the original document. *
****

ED 427 006

American Association of Colleges for Teacher Education

In partnership with

The DeWitt Wallace - Reader's Digest Fund

Comprehensive Teacher Education

SP038309

PERMISSION TO REPRODUCE AND DISSEMINATE THIS MATERIAL HAS BEEN GRANTED BY

D. Imig

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

1

BEST COPY AVAILABLE

U.S. DEPARTMENT OF EDUCATION
Office of Educational Research and Improvement
EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

☐ This document has been reproduced as received from the person or organization originating it.

☐ Minor changes have been made to improve reproduction quality.

• Points of view or opinions stated in this document do not necessarily represent official OERI position or policy.

This document and the projects that led to its production were supported by a grant from the DeWitt Wallace-Reader's Digest Fund

The opinions, conclusions, and recommendations expressed in this monograph do not necessarily reflect the views or opinions of the DeWitt Wallace-Reader's Digest Fund. DeWitt Wallace-Reader's Digest Fund does not necessarily endorse or warrant this information. The AACTE is publishing this document to stimulate discussion, study, and experimentation among educators. The reader must evaluate this information in light of the unique circumstances of any particular situation and must determine independently the applicability of this information thereto.

Copies of
Comprehensive Teacher Education: A Handbook of Knowledge
may be ordered from:

AACTE Publications
1307 NewYork Avenue, NW, Suite 300
Washington, DC 20005-4701

Single copy $15.00 for AACTE members
$20.00 for non-members
plus shipping & handling charges

Copyright © 1999
by the American Association of Colleges for Teacher Education

All rights reserved

Printed in the United States of America

International Standard Book Number: 0-89333-151-1

Cover design by Carolyn D. Lambert

Acknowledgments

The American Association of Colleges for Teacher Education (AACTE) recognizes the many individuals who contributed to the development and publication of *Comprehensive Teacher Education: A Handbook of Knowledge.*

Generous support from the DeWitt Wallace-Reader's Digest Fund enabled AACTE to implement the three-year Comprehensive Teacher Education National Demonstration Project that informs this publication. To this end, the thoughtful guidance of Project Officer Mildred Hudson was invaluable.

A national advisory committee was convened to guide the project. Members and special advisors included: Martin J. Blank, the Institute for Educational Leadership, Inc., Washington, D.C.; Stephen N. Haymes, DePaul University (Illinois); Rebekah A. Levin, University of Illinois at Chicago; Barbara Ferguson Kamara, Office of Early Childhood Development, Department of Human Services, Washington, D.C.; Jan S. Kettlewell, Georgia Board of Regents; Edward Tetelman, Department of Human Services, State of New Jersey; and Jeannette E. Whitford, Chief Judge, Kalispel Nation, Veradale, Washington. Their advice and expert guidance significantly enhanced project activities.

The four participating project sites were lead by directors who contributed immeasurably to the success of the Project. Site leadership included Ric A. Hovda, Project Director of The Wellness Project, School of Education, University of Louisville, Kentucky; William M. Kane, Project Director of the Interdisciplinary Collaboration Project, College of Education, University of New Mexico, Albuquerque; Walter Crockett, Project Director for Project TEACH (Teacher Education Advancement through Collaboration with Human Services), School of Education, Jackson State University, (Mississippi); and Richard Brandon, Project Director of TIC (Training for Interprofessional Collaboration), College of Education, University of Washington.

The project was managed within AACTE's Research and Information Services Division, under the direction of Mary Dilworth. Mwangaza Michael-Bandele served as project coordinator and lead the development of the handbook. Dagmar Kauffman contributed substantially to the development of the handbook text, with assistance from Mark Lewis and Marjorie Bynum. Technical editing was provided by Judy Beck, graphics and layout by Michael Kane.

Finally, we acknowledge the dedication and commitment of the many persons, both adults and children, from college faculties and student bodies, human and social service agencies, and experts from a wide range of helping professions who genuinely contributed to the collective success of the project and the publication of this handbook.

Table of Contents

I. **Introduction** 1

II. **Comprehensive Concept** 3

Current Context 4
School-linked and School-based Services 5
National Reform Context 5

III. **The AACTE/DeWitt Wallace-Reader's Digest Fund National Demonstration Model** 9

Overview 9
University of Louisville, Kentucky 13
University of Washington, Seattle 18
Jackson State University, Mississippi 23
University of New Mexico, Albuquerque 27

IV. **Bibliography** 31

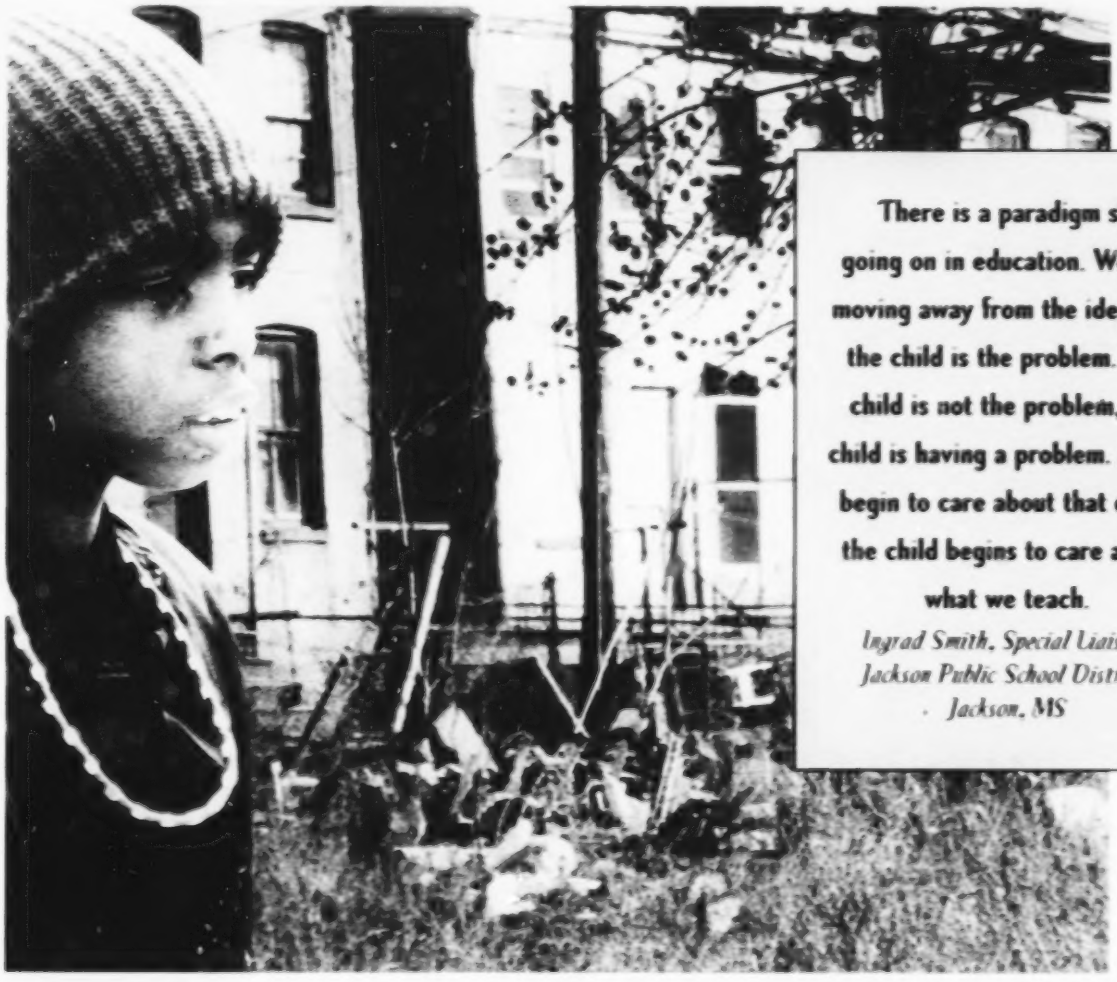
"A journey of a thousand miles begins with the first step."

Introduction

Since 1992, AACTE and the DeWitt Wallace-Reader's Digest Fund have worked in partnership to advance the knowledge base of comprehensive teacher education. That partnership, the AACTE/DeWitt Wallace-Reader's Digest Fund's Comprehensive Teacher Education National Demonstration Project, is grounded in the mutual belief that the preparation of classroom teachers must consider not only the academic needs of students, but their human needs and varied societal circumstances as well. Hence, teacher preparation that includes the perspective of the social worker, health practitioner, and other human service professionals provides a more expanded, comprehensive training that addresses a fuller range of student needs. The results of this partnership, operationalized as four demonstration models at geographically diverse universities, are represented in this publication. The University of Louisville, Kentucky; Jackson State University, Mississippi; the University of Washington, Seattle; and the University of New Mexico, Albuquerque, comprise the national demonstration.Teacher educators and other helping professionals interested in providing comprehensive professional preparation should find this handbook helpful. While the text includes a summative overview, it presents lessons we have learned through the process of implementation. Many of those lessons are akin to simple wisdoms of interaction centered upon the ability of human beings to genuinely accommodate and support each other beyond professional dictates. Such lessons rest squarely on old educational wisdom—Wisdom that affirms the value of varied perspectives working in concert on behalf of children. If as the popular African proverb states, "it takes a village to raise a child," teachers, and others must be knowledgeable of the expertise that informs the varied perspectives of the villagers and gain proficiency at organizing this pool of resources.

The project has reminded us that the most impacting work is the least complex. At the same time, the most simplistic work can be quite demanding,—even revolutionary. We welcome the opportunity to share the learned outcomes of our implementation journey.

Rationale for comprehensive teacher preparation are plentiful, ranging from the budgetary benefits of combining program instruction to the need for addressing the societal ills that are manifested by the students. While these are perfectly valid reasons for developing comprehensive preparation programs, the AACTE/DeWitt Wallace-Reader's Digest initiative was grounded in an awareness that students bring genius into the classrooms, which must be identified and harnessed to serve as a springboard for academic success, despite the presence of social and health problems. Comprehensive teacher preparation compels teachers to assume the responsibility of identifying the strengths and interests of students, even when camouflaged by social and health barriers, and moves beyond the student deficit model of attending to the needs of so called "at-risk" or "disadvantaged" students. The project recognizes the well-researched impact of teacher expectations, affirms the infinite ability of every student, and assumes professional responsibility for student learning. It becomes, therefore the responsibility of the teacher to identify and neutralize barriers to teaching, so that learning will occur. Knowledge of how social workers might address child or family substance abuse or homelessness, or how legal experts address the rights of HIV/AIDS-infected children in the classroom, all affect the impact of teachers. Teachers must be capable of recognizing teaching/learning barriers and of minimizing them by either addressing them directly or referring the student to the appropriate professional, whom the teacher is prepared to work with on behalf of the student.



There is a paradigm shift going on in education. We are moving away from the idea that the child is the problem. The child is not the problem, the child is having a problem. As we begin to care about that child, the child begins to care about what we teach.

Ingrad Smith, Special Liaison, Jackson Public School District, Jackson, MS

Comprehensive Concept

Alternately referred to as collaborative teacher education, interprofessional training, integrated service training, and other names that suggest a range of cooperative preparation experiences, the notion of "comprehensive preparation" reflects the growing need for teachers to know more in order to successfully address the growing and varied needs of the students they serve. There is a clear and engaging impetus within education reform calling for comprehensively trained teachers—a preparation designed to produce educators equally competent in traditional academic disciplines and prepared to meet the social and health needs of students. While not a new idea, comprehensive preparation represents a matured understanding that learning best occurs where there are minimal social and health challenges that inevitably distract from learning. Where there are academic needs there are social realities. Successful teachers comprehensively prepared to foster learning are able to meet these realities. The challenge of teacher education is to produce student educators to do just that.

Current Context:

By No Fault of Their Own...

Approximately 10 million children, who have been placed in disadvantaged social environments, arrive at schools throughout the country every day. Many are not ready to learn and acquire the basic skills needed to forge a successful future for themselves (Dryfoos, 1990). Factors such as high levels of poverty, inadequate housing, and unemployment have an adverse impact on many children.

Between 1985 and 1991, 36 states and the District of Columbia experienced an increase in the percentage of low birthweight babies. In a world of ever improving technology and medical advances, such increases suggest that expecting mothers do not have adequate access to preventive health care.

The infant mortality rate decreased to an all-time low in 1991 of 8.9 per 1,000 compared to 10.6 per 1,000 births. Even with this encouraging progress, infants born into socially and economically distressed neighborhoods still experience a much higher mortality rate because of less access to neonatal intensive care and prenatal care.

Due to the improvements in trauma care, auto safety, and accident prevention, child death rates decreased from 33.8 per 100,000 in 1985 to 30.7 per 100,000 in 1991. Despite this gain, U.S. children run a great risk of dying at a young age. In 1991, 15,693 children between the ages of 1 and 14 years died in the United States. In 1991, the death rate for African American children was significantly higher than that for white children, i.e., 48.1 compared to 27.8 per 100,000.

Youth life expectancies also decreased significantly. Between 1985 and 1991, the teen violent death rate increased by 13 percent in over two thirds of all states and the District of Columbia and can be attributed "almost entirely to a doubling of teenage homicide victims" (Annie E. Casey Foundation, 1994, p. 15). In addition, the long-term trend of children living in poverty continues, with 20 percent living in poverty in 1991, and 25 percent of preschoolers under the age of 6 living below the poverty line.

The percentage of births by teenage mothers and pregnancies by single mothers has increased dramatically. The National Center for Health Statistics reported that teenage pregnancies rose to the highest level ever during the 51 years for which this information has been available. Young mothers with insufficient education coupled with low or no incomes have little opportunity to raise children successfully.

The share of children living in single-parent families also increased from 22.7 percent in 1985 to 25.1 percent in 1991 nationwide and occurred in all states but six. Children growing up in single-parent households are more likely to be economically poor than are children in two-parent families: 42 percent as opposed to 8 percent (U.S. Bureau of the Census, 1994).

Yet another indicator of the well-being of the nation's children is the juvenile crime arrest rate, which reflects the number of youth between the ages of 10 and 17 who were arrested for homicide, forcible rape, robbery, or aggravated assault. This rate increased nationally from 305 per 100,000 in 1985 to 457 per 100,000 in 1991.

Advanced skills and technical knowledge have become increasingly important in attaining a meaningful job, yet too often high school students do not graduate on time or do not graduate at all. Nationally, on-time graduation has decreased by 4 percent between 1985 and 1991, and the unemployment rate of those who dropped out of high school was nearly 50 percent more than for those who graduated. The number of youth who are not in school or in the labor force are at a still greater risk of delinquency, crime, and diminished success.

Factors such as these have created conditions that continue to affect in greater measure children of color than white children. Children of color are much more likely to be placed in socially and economically distressed neighbor-

hoods than are White children. One out of 4 African American children and 1 out of 10 Hispanic children live in distressed and economically disadvantaged neighborhoods compared to 1 out of 63 white children (Annie E. Casey Foundation, 1994).

School-linked and School-based Services; Full-service Schools

The impact of these social factors on schools has been powerful. Schools and teachers have increasingly recognized their responsibility to teach all children, feeling the obligation to feed children; provide psychological support services; offer health screening; establish referral networks related to substance abuse, child welfare, and sexual abuse; cooperate with the local police and probation officers; add curricula for prevention of substance abuse, teen pregnancy, suicide, and violence; and actively promote social skills, good nutrition, safety and general health (Dryfoos, 1994). Comprehensive professional preparation fosters school-based collaboration, which focuses on identifying and working toward a common goal so that children will benefit from educational and other services available in the community.

The concept of collaboration between teachers and human service professionals to provide comprehensive service delivery has experienced a revival since it last emerged 20 years ago. Following the dictum, "Care about the child, so the child will care about what we teach," many educators, administrators, and federal and state policymakers have called for reform and invoked school-based or school-linked service delivery systems. Michael Kirst, professor of education at Stanford University, promotes the co-location of a variety of services and children's activities from public and private agencies in one place as a strategy that could bear significant results. Joy Dryfoos, noted education researcher, identifies the full-service school as a strategy that would allow community agencies under partnership agreements to come into the schools and provide services in response to the needs of the particular school-community (Office of Educational Research and Improvement, 1994).

To strengthen youth and families, some communities across America have integrated the services rendered by many agencies and professionals (particularly those of educators and health, human services, and law enforcement professionals) and have located them in their schools. The services and activities offered are as diverse as the needs of the student populations, the schools' racial/ethnic make-ups, and their geographic locations. Services have ranged from school-based health clinics that provide preventive, primary, and mental health care services to health education to after- and before-school care to parent education seminars and to family resource centers.

National Reform Context

Recent federal legislation such as Goals 2000 and the reauthorization of Title I, the Elementary and Secondary Education Act, stress the importance of providing comprehensive services. In 1994, the U.S. Office of Educational Research and Improvement (OERI) and the American Educational Research Association (AERA) convened a conference to determine the appropriate research and practice agenda on school-linked, comprehensive services for children and families. *School-Linked Comprehensive Services for Children and Families*, a 1995 publication that evolved from this conference, describes the need for cabinet-level discussion regarding policies that must address the following basic principles:

- student learning depends upon partnerships involving all relevant community institutions;
- comprehensive and coordinated services must focus on results;
- local needs and commitment should determine the shape of collaborative systems; and
- research data should be used to affect assessment and accountability.

Acting on the request of Congress to review the health status of American adolescents, the Office of Technology Assessment (OTA, 1991 a, b) also

recommended the development of comprehensive health centers in schools to improve the general health status of adolescents, thereby enabling them to realize gains in health, education, and overall well-being. As an estimated 15 percent of adolescents aged 10 to 18 have no health care coverage at all, the Columbia University School of Public Health also stresses the importance of ameliorating the adverse impact of adolescents' poor health status on their educational attainment. In a report sponsored by the Carnegie Foundation and the Centers for Disease Control, researchers present the proliferation of new initiatives as a "testament to the effectiveness of school-based health centers in reaching high-risk children and youth" (Brellocks and Fothergill, 1993, 11).

The American Medical Association and the National Association of State Boards of Education emphasized in their 1990 report *Code Blue: Uniting for Healthier Youth*, the inextricable connectedness between school efforts to improve academic performance and efforts that promote improve health. To strengthen students' educational attainment, they urge all involved parties from families and neighborhoods to the health community and private and public sectors to form new partnerships so that adolescents may achieve at levels exemplified by the high standards set forth in Goals 2000: Educate America Act.

However, policymakers and researchers clearly point to the fact that high educational attainment is unlikely to be achieved without creating positive synergy between the educational and health services. U.S. Assistant Secretary for Elementary & Secondary Education Payzant stresses that ultimately, we want healthy and emotionally stable children who are academic achievers, and urges educators and schools to participate in the conversation (Institute for Educational Leadership, 1995).

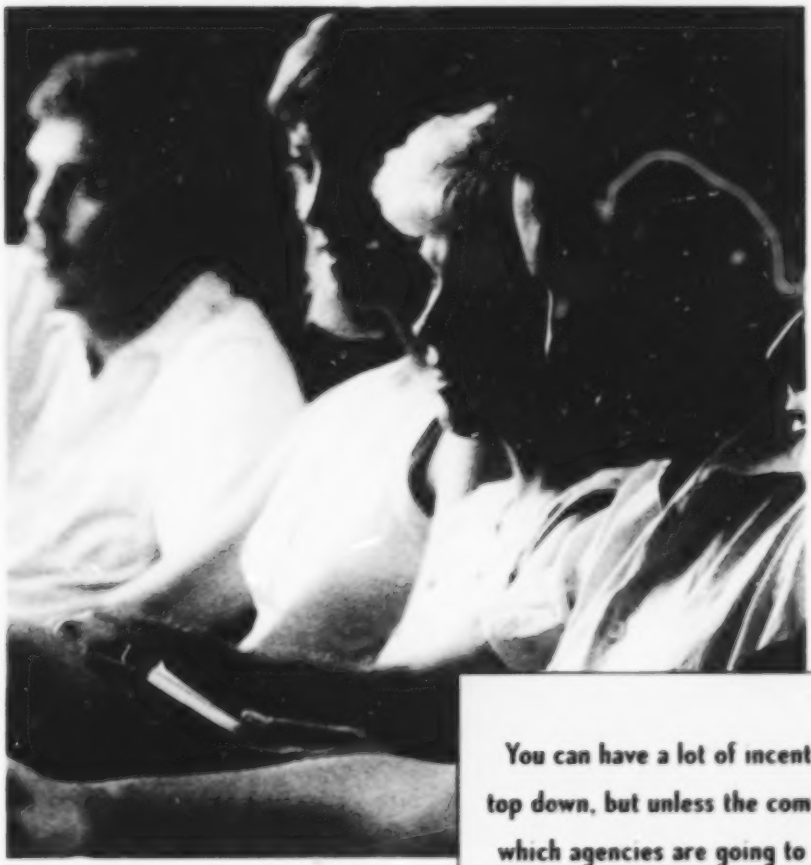
States have begun to change the ways in which services to children, youth, and families are delivered, promoting community- based strategies that involve children and their families as active participants rather than being passive recipients. To achieve broad-based change, federal and state systemic efforts must

occur simultaneously. Specifically, expanded federal support of collaboration would stimulate leadership and simultaneously, community based planning and delivery of children's services at the state level" (National Health & Education Consortium, 1995) Many states have begun to provide such stimulus and play an important role in sparking the development of comprehensive service delivery centers.

Such centers have been implemented in New Jersey, Kentucky, California, and Florida. They are located at or near public schools and emphasize comprehensive services, early intervention, and family involvement. The state of Washington has created a cabinet-level Family Policy Council. Since its inception in 1992, the council has worked with 22 local communities to integrate health, education, and social services. In 1990, the state of Wisconsin adopted a plan focusing on the coordination of community-based, family-centered services. The plan was expanded by Wisconsin's Bureau of Public Health, setting forth guiding principles to create such systems. Other states including Arkansas, Connecticut, Georgia, Massachusetts,

Michigan, New Mexico, Oregon, and Ohio have started similar efforts with varying approaches and support (Dryfoos, 1994). Even though some states have started to legislate appropriate policies, many more policy changes are needed. U.S. Assistant Secretary for Elementary and Secondary Education Payzant calls on all levels—local, state, and federal—to model collaboration by legislating new policies and institutionalizing new models. Top-down as well as bottom-up activities, then, will provide changed attitudes and behaviors enabling collaborators in the comprehensive services field to make a real difference in children's lives.

Ideally then, collaboration needs to involve CEOs of agencies, who enact change at the macro level. Front-line educators and health and social services professionals must share knowledge, responsibility, and professional support. At the grassroots level, on-site professionals must form a partnership with the



You can have a lot of incentives and products from the top down, but unless the communities buy in and decide which agencies are going to participate, it is probably not going to work very well.

(Thomas Payzant, Linking Schools with Health and Social Services, 1994, p. 20)

BEST COPY AVAILABLE

children and families they serve. In this process it is important that all partners work with each other in determining the kinds of services a particular community needs. Top-down incentives will only benefit communities if grassroots participants are invested and involved in the service design and, delivery, sharing ownership and accountability.

In an effort to provide relevant and practical information, the U.S. Department of Education and the U.S. Department of Health and Human Services published *Together We Can* (TWC) (1993), outlining a collaborative process to develop a holistic approach in treating the problems of children and families by integrating services. TWC advocates collaborative strategies as the key element in systems change. Participants in such ventures need to (1) share a vision, (2) establish common goals, (3) agree to use their power to achieve them, (4) commit their resources, and (5) be willing to alter existing policies. In a similar attempt to provide operative ideas, the U.S. Department of Education published *An Idea Book* (1994), which addresses many ways in which school-wide projects can be implemented and systemic change accomplished.

Collaborative Imperative

As the reform movement has addressed the integration of services for children and their families, less attention has been paid to the question of interprofessional preparation. In order to provide integrated services to children and their families, teachers and other health and human services professionals need to be educated in an interdisciplinary fashion, so they are informed about the types of services other agencies provide and know how to collaborate with other service professionals. In the past, schools of education, as well as human and social services departments, have emphasized specialization rather than integration and have existed in isolation from each other. The National Commission on Children (1991) stresses the importance of collaboration and urges health professionals to work with professionals from diverse disciplines in order to improve the quality of health and social services. To accomplish that goal, all involved professional schools must demonstrate relational thinking as opposed to categorical thinking. To mount a reform effort, professional schools need to embrace the primary and holistic assumption that youth cannot be assisted without considering their families, and understanding how to best support the family (Lawson & Hooper-Briar, 1994).

In a context of experimentation and diversity of comprehensive service programs, colleges and universities need to become proactive in their planning of professional preparation. Researchers call for significant changes in the ways that higher education institutions prepare professionals. Interprofessional collaboration efforts need to proceed simultaneously with interprofessional education. To promote a holistic view of the child, professional preparation programs need to model an interdisciplinary, integrated, comprehensive approach for human service professionals, enabling them to employ this strategy in their interaction with children, youth, and families as a matter of course.

Thus, interprofessional education, which prepares human services professionals for sharing, needs to evaluate: (1) the origins of the participating profession, (2) The practical characteristics and requirements of interprofessional collaboration in communities, and (3) the shared commonalties and complementarities of the involved human services fields (Lawson & Hooper-Briar, 1994).

"No matter what the accomplishment, someone helps you!"

The AACTE/DeWitt Wallace-Reader's Digest Fund National Demonstration Model

Overview

The American Association of Colleges for Teacher Education (AACTE), in partnership with the DeWitt Wallace-Reader's Digest Fund, implemented a national demonstration project to incorporate knowledge of health and human services in the training of prospective and practicing teachers. The goals of the project were to produce new strategies in collaborative efforts and to provide new insights into the benefits of collaborative service delivery and training.

The National Demonstration Project was comprised of four different project sites: The Wellness Project at the University of Louisville; the Training for Interprofessional Collaboration (TIC) Project at the Human Services Policy Center at the University of Washington, Seattle; Project TEACH, based at the School of Education at Jackson State University in Jackson, Mississippi; and the Interdisciplinary Collaboration Training Project (ICTP) at the College of Education, University of New Mexico, Albuquerque.

The four sites represent a range of geographic locations—and emphasize different integral parts in the development of their interprofessional preparation models. Varying by institutional mission and focus as well as by client needs, all four projects have contributed significant practical information and distinct data to the knowledge base of interprofessional preparation and comprehensive service delivery.

The national project yielded practical information regarding the implementation and institutionalization of interprofessional education components. All of the participating sites in AACTE's national project were guided by the basic principles in establishing school-linked comprehensive services put forth by the Office of Educational Research and Information (OERI) and the American Educational Research Association (AERA) (1995).

In three years, the national project yielded a variety of learnings that demonstrated the:

- significant value and positive impact of state support on interprofessional ventures, as evidenced at the project sites in Louisville, Kentucky, and Albuquerque, New Mexico;
- tremendous strengthening of community relationships and enhanced impact of community-based activities by locating the project office inside a school, as evidenced at the Wellness Project in Louisville, Kentucky;
- critical importance of an adequate infrastructure allowing parents and preservice teachers to gain access to the human and social services agencies, which was not present and constituted a barrier in rural Hinds County, Mississippi;
- diminished impact of student and family services in a transient school population, as evidenced in Albuquerque, New Mexico;
- positive affect of strong, well-grounded community relationships on the institutionalization of interprofessional preparation programs, as evidenced in Jackson, Mississippi; and
- necessity of discussing key components of the academic structure such as tenure and budgets when collaborating with several units at the academy, as evidenced at the University of Washington, Seattle.

BEST COPY AVAILABLE

In addition, the following were factors in success across all project sites:

- Open lines of communication—the collaborative project cannot be successfully carried out without open communication. Summarizing, sharing, and clarifying information must be constant. Active listening; giving and receiving feedback; constructive confrontation; and interpreting and responding to nonverbal cues are critical components that need to be addressed to keep communication lines open at all times.
- Recognition that change comes slowly—working with many interested professionals, faculty, and community members is time consuming. Project participants report that the lack of time is the biggest impediment to implementing collaboration. Keeping in mind that other participants' input is critical in collaborative efforts, collaborators may need to adjust their expectations about the extent of change they can effect.
- Community involvement—sharing of leadership and ownership with the community needs to be built into any project from the onset.
- Accountability structure—articulating the organizational mission, structure, services, and language of all collaborating partners is necessary to ensure smooth implementation of the collaborative effort.
- Sponsorship—sponsoring interested persons from other professions and/or academic departments is crucial to getting a collaborative effort off the ground. Sponsors loan their credibility to the effort and enable newcomers to feel more comfortable. In the process of seeking out collaborators, it proved even more advantageous if prospective collaborators had similar goals and values and stood to benefit from the project.

The project was multidimensional, representing regional, racial/ethnic, and urban/suburban/rural diversity. While the individual outcomes of each site are described in the following section, the cumulative pro-

We define systems change as a revision of the ways that people think, behave and use their resources to affect fundamentally the types, quality, and degree of service delivery to children and families. (...) Collaborative strategies are the key to systems change.

(U.S. Depts. of Education and Health and Human Services, Together We Can, *p. vii)*

ject represents a powerfully diverse demonstration. Colleges, schools, and departments of education throughout the nation, and similar institutions representing a wide range of communities and institutional circumstances, are likely to find some aspect of this model akin to their unique personality. It is the diversity of this project that is perhaps its greatest strength, as its benefits are not only theoretically sound, but hold the real promise of widespread utility.

It is evident that there is no one way to collaboratively design and implement comprehensive teacher preparation programs. The project has produced an array of implementation types that can be mixed and matched to fit the characteristics and needs of any site wishing to replicate. This adaptability increases the appeal and likelihood of successful project replication, as it minimizes the tendency to force fit what has worked in one project environment.

The outcome-centered approach to national coordination contributed to the development of the shared site perspective that emphasizes the need for all project activity to have an impact on the quality of life for teacher education students and the community in real ways. Consequently, a large number of individuals benefitted from this initiative: teacher administrators, faculty, preservice and inservice teachers, public school and agency personnel, students, families, and communities. The table below represents the number and range of project participants from all four sites.

Activities at the four sites yielded a significant pool of data that provides insight into the process of implementing comprehensive teacher preparation programs. The baseline information, representing a range of implementation experiences, serves as an experiential template on how a comprehensive teacher education program at the university can be implemented. The range of experience includes community school-based (Louisville), social-agency based (Jackson), academy-based (Seattle), and state-leveraged (Albuquerque) models. These sites and partnering participants represent a cultural and geographic diversity of communities served including African American, European American, Hispanic, rural, urban, suburban, and transient immigrant populations.

Community School Based. The University of Louisville's process of comprehensive teacher education, centered at a community public school, contributed much to understanding the value and challenges of configuring a teacher preparation process that was directly responsive to the people it serves. This youth-centered demonstration, conceptualized from a preventive health frame of reference, provided a refreshing perspective and rationale for comprehensive teacher preparation beyond the need to attend to the social problems of youth. The implications of this data for broadening the current "youth at-risk" paradigm, which often accompanies the notion of interprofessional comprehensive teacher education, shows significant promise.

Table 1

AACTE/DeWitt Wallace-Reader's Digest Fund's Comprehensive Teacher Education National Demonstration Project

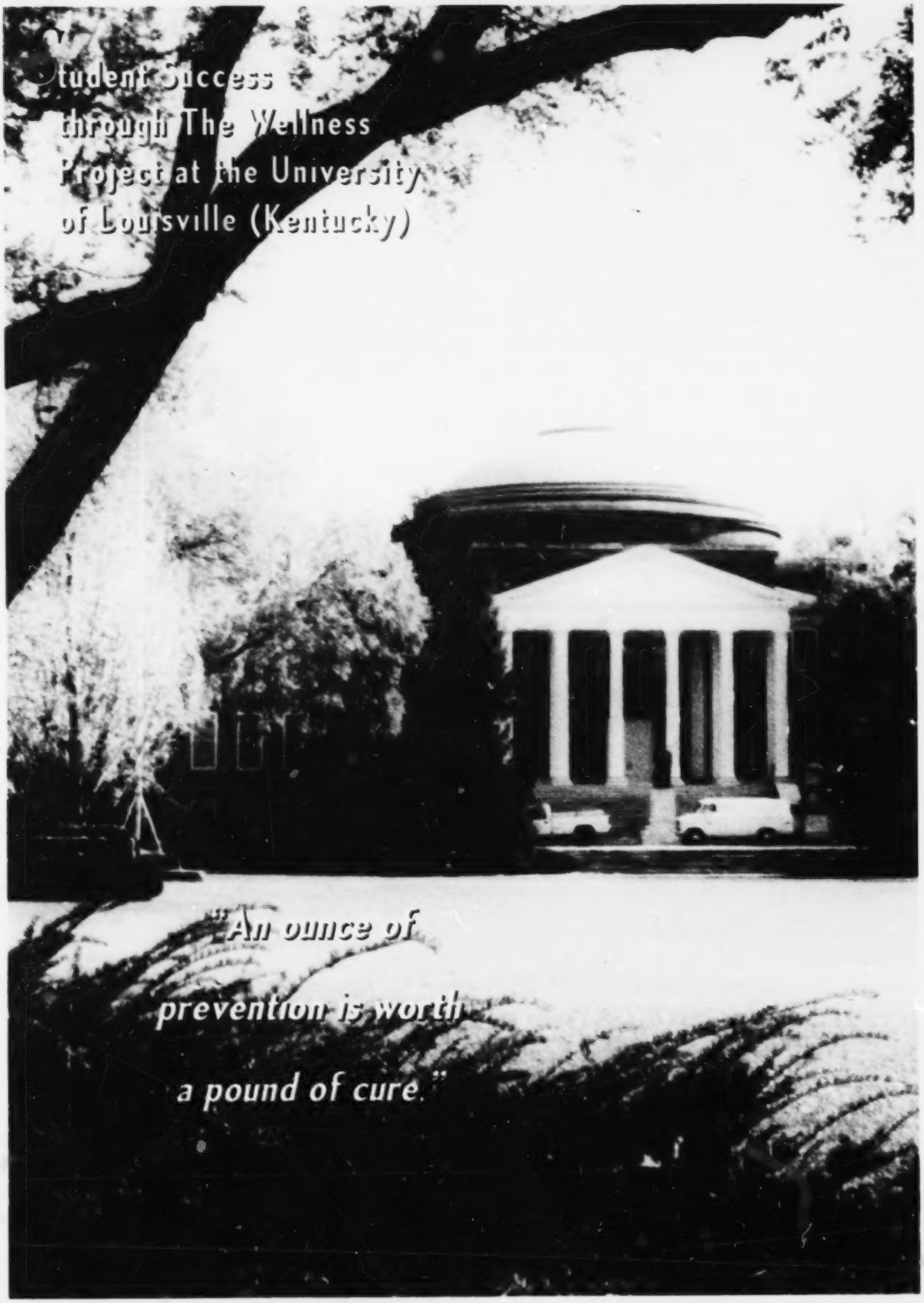
Teacher Education Students	804
Teacher Education Faculty	53
Human Service Students	313
Human Service Professionals	241
Inservice Teachers	418
Number of Involved Participants	1,829

BEST COPY AVAILABLE

Social Agency Based. The advantages of informal community linkages spawned by perceived alumnae obligations are evident in Project TEACH at Jackson State University. How interprofessional comprehensive preparation might be incorporated into the current academic program through existing courses, and therefore accelerate its institutionalization, can be studied by analyzing the Jackson site. There is the distinct sense, while not supported by empirical evidence, that an expanded sense of social responsibility and community obligation was at work in this homogeneous community served by this historically Black university. Informal telephone calls and social networking of the project's personnel quickly yielded student placement at a range of social agencies. The ease at which community connections were made and sustained was unparalleled at any of the other project sites.

Academy Based. Processes that are university/faculty driven, and therefore tend to reflect the needs and concerns of academe are especially well represented by documentation of the University of Washington process. Issues of tenure, professional turf sharing, and university politics are illustrated. As the longest established demonstration of the four, a comparatively well-developed evaluation mechanism specifically designed to assess the interprofessional preparation process is available, as well as interprofessional course curriculum.

State Leveraged. The University of New Mexico model contributed significantly to understanding the process of reform associated with implementing change in general and institutionalizing an interprofessional approach to preparation, in particular. The implications of massive state support of comprehensive preparation—the advantages and disadvantages of politically linked support—is further informed by this project.



BEST COPY AVAILABLE

The University of Louisville's Wellness Project *field tested a model designed to expand the early intervention and prevention services of comprehensive, community-based centers. These service centers are largely the result of the 1990 Kentucky Education Reform Act, which calls for sweeping changes including the provision for family resource and youth services centers in the state's neediest schools. The state-initiated centers were created to enhance students' abilities to succeed in school by providing access to health, training, employment, substance abuse, mental health, and crisis intervention services and serve as perfect partners for the University of Louisville's Wellness Project: Student Success Through Wellness for Urban Children and Families. The Wellness Project was developed too: (a) contribute toward the development of a model for conducting interdisciplinary collaboration; (b) build a support foundation in the form of a social network for the interdisciplinary training of pre- and inservice human services professionals at the university; and (c) address the health and human services needs of the school-site community by emphasizing preventive measures. The partners in this collaborative effort are the Center for the Collaborative Advancement of the Teaching Profession in the University of Louisville School of Education, and the Division of Community Health and Preventive Medicine, which is located within the university's School of Medicine.*

Setting and Background

The University of Louisville, a major university with a longstanding history and mission of preparing human services providers, is located in the largest metropolitan area in the state of Kentucky. The University of Louisville School of Education contributes significantly to the preservice preparation and continuing education of teachers in the area. Approximately 75 percent of the School of Education's graduate students are teachers from the greater Louisville area. The Schools of Medicine and Social Work contribute in similar fashion to the preparation of professionals in the area with some 800 alumni from the University's Kent School of Social Work being employed in the Louisville metropolitan area.

Community Sites

Community sites for the implementation of the Wellness Project have served Iroquois High School and Iroquois Middle School, which are located on adjoining property, and Sallie B. Rutherford Elementary School, located one mile from the high and middle schools. Each of the public schools house a state-initiated Youth Services Center. The schools are located in a low- to middle-income residential neighborhood in southern Jefferson County. Approximately 70 percent of the elementary school and 48 percent of Iroquois High and Middle School students are eligible for free or reduced lunches.

Implementation

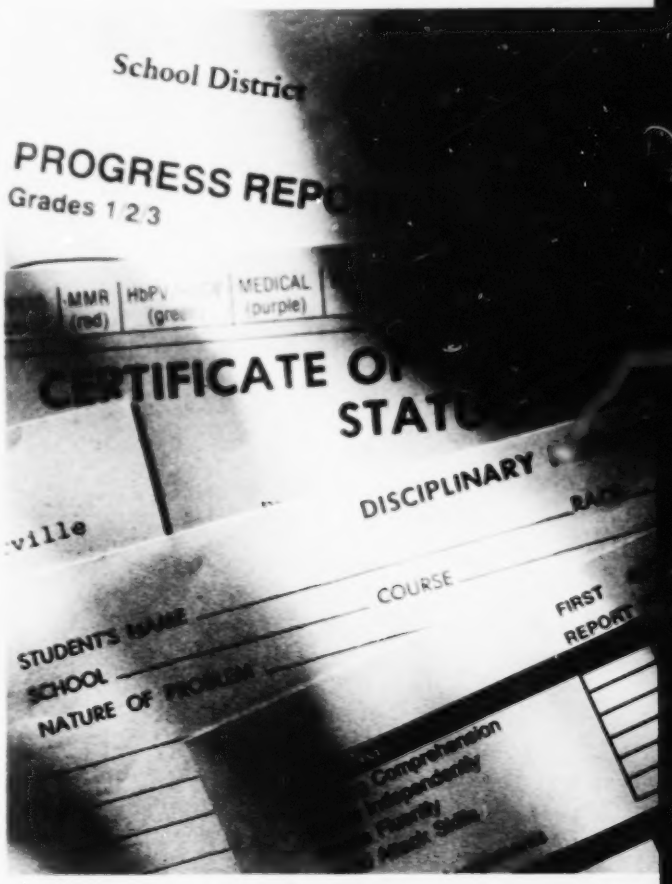
The Wellness Project incorporated the university's extensive experience with professional development schools, where education faculty are placed in local schools to ensure that the teacher education curriculum is based in reality and where student interns are placed for clinical experience. The University of Louisville and the Jefferson County Public Schools have been among the leaders in establishing professional development schools. Based upon 6 years of experience with several professional development communities, which included Iroquois High School, Wellness Project planners expanded this concept to include professionals from different human and social services organizations. This expansion created opportunities for (1) interdisciplinary service planning and delivery to enhance the shift from crisis intervention to a preventive model of community wellness and (2) cross-professional experiences to enlighten pre- and inservice teachers and other human service professionals, thereby increasing their individual and collective effectiveness. Furthermore, the Wellness Project built upon the Iroquois

Initiative, a collaborative effort designed to bring about the changes necessary to redesign urban schooling at Iroquois High and Middle Schools. The initiative's purpose is to promote student success and develop an effective collaborative model for urban school reform.

Upon the establishment of an administrative and managerial project structure, essential for project accountability, Wellness Project staff performed its first project objective and assessed the needs of their clients. This activity conforms to the basic principle put forth by the Office of Educational Research and Improvement (OERI) and the American Association of Educational Research (AERA) that calls for a community-based needs assessment. Upon the evaluation of the needs assessment, project staff developed five school/community-based initiatives: the Iroquois Child Care Center, an immunization drive, the Legal Education Initiative, the Occupational Health and Wellness Initiative, and the Peer Mediation Initiative. Interdisciplinary teams, made up of University of Louisville teachers, human and social services practitioners, and students from various disciplines, are responsible for developing a plan to meet the expressed need, providing the services to implement the plan, assessing effectiveness, and providing recommendations on how the plan might be improved. All of the following initiatives were planned and directed by individual advisory committees.

The Iroquois Child Care Center opened up at the Iroquois High School as the only day care center incorporated into a regular coed high school. A lead teacher/community contact person facilitates the day-to-day operations. Graduate students participating in the Wellness Project are assigned to the child care center to assist the teenage mothers/students, families, and children. To reach as many teenage mothers as a possible, the day care center promoted its opening with a baby shower with guests attending from the Jefferson County Public Schools, the University of Louisville, and the community. This initiative has also assisted university faculty to prepare the center for accreditation by the National Association of Young People (NAYC) and evaluate the child care center using NAYC's two rating scales.

Equally successful was the immunization initiative. The 1993-94 school year at Iroquois High School began with 32 percent of the student body lacking the required immunizations. In collaboration with the Louisville/Jefferson County Health Department, this initiative managed to bring all but 50 of the 1,100-member student body



up-to-date on their immunizations. The initiative is also studying the reasons why some students get immunized and others do not. Doctoral students have drafted a survey instrument to be administered to the students' parents. Furthermore, students in a preservice graduate education class drafted a brochure explaining about immunization compliance.

The Legal Education Initiative focuses on the role that the legal system plays in han-

BEST COPY AVAILABLE

dling violence, abuse, and truancy issues of students. Legal aid staff, private practice lawyers, and social workers have presented seminars in which preprofessionals receive training in authentic, real work settings. The goals of this initiative are to (1) inform public and private sector attorneys about family and school concerns that impact upon and determine the health of the community, (2) provide teachers with the understanding of the issues and to develop skills and competence to deal with them, and (3) identify the impact of legal issues upon the education of children. Videotaped sessions were produced for dissemination to interested individuals.

In the process of developing the legal seminars, the Wellness Project brought together legal specialists to talk with focus groups at the participating schools about the juvenile justice system. Again, with a proactive mission in mind, focus group participants were asked the question,"If you had an attorney available to you during your work day, what kinds of questions would you ask him/her?" Pre- and inservice teachers, legal participants, and representatives of the university's School of Social Work and the School of Law discussed laws pertinent to activities that included school property, attendance, and truancy.

The Occupational Health and Wellness Initiative also conducted a survey asking school staff to identify stress factors and to make recommendations for their removal. The results were discussed at a meeting planned with the school administration and faculty. Health-risk appraisals such as cholesterol and blood pressure screening were then made available to all interested staff. Clubs centering around walking, aerobics, line dancing, karate, massage and other interests were formed and served school personnel from all three sites. In addition, promotional tools such as newsletters, health tips, seminars, and workshops have raised the wellness awareness of many school personnel.

The Peer Mediation Initiative arose out of the work of two high school teachers who had been engaged in helping students learn to express anger and resolve conflicts constructively. The Wellness Project offered its assistance, which the teachers welcomed. More than 175 students have been trained in peer mediation through the project.

Challenges and Successes

By involving students and committed professionals in the real-life issues of real-life people, the Wellness Project built significant grassroot support for its initiatives within the community. As a result, the Service Learning Component of the Wellness Project has replaced the traditional 30 hours of student observation in an individual teacher's classroom with 30 hours in an interdisciplinary placement position. The university-based project coordinator's introduction of this component for possible inclusion in the School of Education's policy coincided with the restructuring of the School of Education to include a stronger interdisciplinary focus.

Aided by the climate of reform in the state of Kentucky as well as the University of Louisville's experience with professional development schools, the Wellness Project's objective to have an impact on the community in a preventive rather than interventive fashion was successfully met. The American Medical Association, in its report *Code Blue* (1990), states that children who are not well cannot achieve educationally. The Wellness Project succeeded in a relatively short period of time to provide immunization to almost all of the students at the participating high school. It also acted proactively by assessing the reasons why parents do not get their children immunized to use that information in a preventive manner.

Following the basic principles set forth by OERI and the AERA, the Wellness Project demonstrated the success of community-based needs assessment. From the outset, the Wellness Project was determined and succeeded in focusing its services, like the day care center and all the other initiatives, on real-life issues and its ultimate goal to better its clients' wellness.

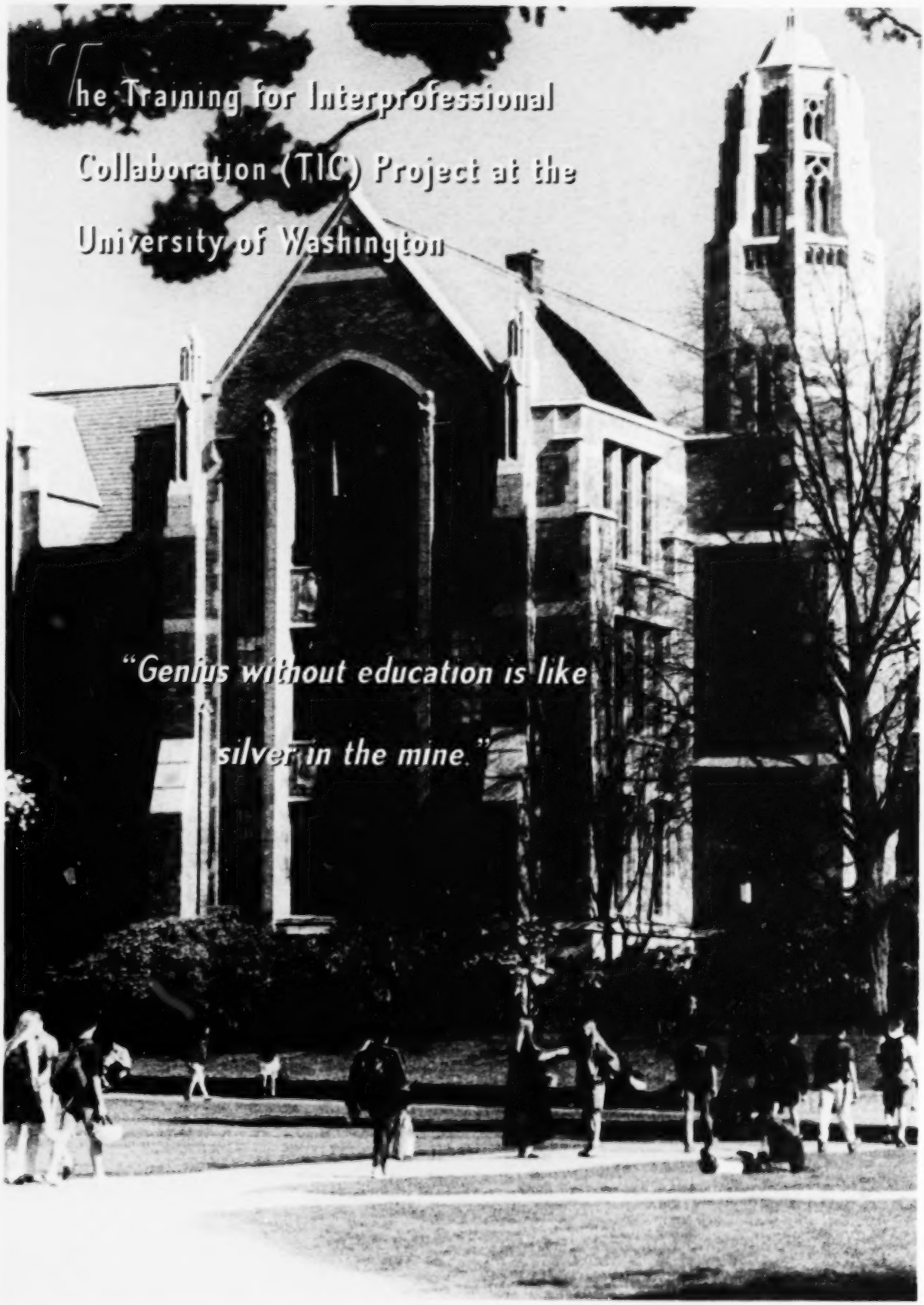
The Wellness Project's success can be attributed to several factors. Persons who demonstrated effective leadership skills at every level—operational, management, and

advisory—facilitated the transition from being a project to becoming part of the structure of multiple organizations. Recognizing and drawing on important collaborative skills such as flexibility, open communication including active listening and asking questions, and observation, Wellness project staff overcame problems such as territorial clashes and unfamiliar professional jargons. Furthermore, staff sought out collaborators that would stand to benefit from the project and who would have compatible goals and values, such as the School of Nursing. Lastly, the placement of the project and a people-oriented coordinator located in one of the participating schools facilitated the establishment and maintenance of open communication lines within the school and between the project and the University of Louisville.

However, project staff were disappointed in the amount of time that was required to lay the groundwork for their collaborative work. To prevent persons from giving up because change was slowly being realized, project staff concentrated on enlisting partners who had similar goals or who gained from the alliance with the project. For example, project staff successfully engaged the legal community because they had pro bono obligations to fulfill, which they were able to satisfy while providing their expertise to the project.

Lessons Learned

- Effective leadership—at every operational, management, and advisory level—is especially important in making the transition from the Wellness Project being a "project" to becoming a part of the structure of multiple organizations. For example, while the project has experienced many of the same problems collaborators generally do in these types of ventures—unfamiliar language, turf disputes—working relationship resulted. This success is at least partially attributed to the university-level staff who could, and did, keep the lines of communication open when friction occurred.
- Having a full-time coordinator at the school level was critical to managing the project because of the demanding, time-consuming nature of the work. This location is invaluable to the development of a needs based/community centered project that demands professional preparation around real issues. The close proximity of the project to children and communities served as a prime motivating factor for all participating partners.
- "The little tries approach" is a work style that involves "planning a little, doing a little, planning a little more, doing a little more." It has been used to establish working relationships and links between parties in virtually every initiative and every venture of the project.
- When project focus is on "involving people in real issues that require real work within the community," rather than focusing on hypothetical or theoretical issues, the interest and commitment of all involved is likely to be much deeper.
- The Wellness Project's third goal is to involve teacher education students in real issues that required real work within the community. As a result, the project has been able to build grassroots support—in the form of a social network—for interdisciplinary training at the higher education level. Two important initiatives—both of which were started as "little tries"—have been created through this social network: Service Learning as Policy in the School of Education and The Interdisciplinary Seminar: Another Little Try.


The Training for Interprofessional Collaboration (TIC) Project at the University of Washington
"Genius without education is like silver in the mine."

TIC Project components have included:

- *discovery of specific competencies necessary for collaboration;*
- *design of curriculum to teach these competencies for collaboration;*
- *analysis of external institutional barriers to collaboration;*
- *analysis of barriers to professional collaboration within the university;*
- *evaluation of project implementation process and outcomes;*
- *information exchange and dissemination; and*
- *identification and support of eight communities as partners in on-site education of preservice students.*

Setting and Background

The University of Washington plays a central role in the preparation of teachers and other human and social service professionals in the Northwest and has strong ties to local and regional industry. As a major research facility, the university draws many students from throughout the region. As one of six public 4-year higher education institutions in the state, it awarded approximately 40 percent of all bachelor's degrees in 1991. In addition, all involved professional schools provide continuing education courses to inservice professionals in the state of Washington.

Community Sites

The TIC Project negotiated formal partnerships with two community sites: the Meany Middle School Community in central Seattle and the South Central School District in Tukwila, a small industrial city south of Seattle. Located in a culturally diverse neighborhood of Seattle, Meany Middle School draws students from a wide variety of socioeconomic and ethnic backgrounds. Thirty-three percent of the students receive free or reduced price lunches, 17 percent are in special education programs, 40 percent come from single-parent homes, and 9 percent are bilingual. As a performing arts middle school, Meany is involved in many collaborative efforts. It has served as a professional development school and placement site for student teachers. A case management and referral process for students placed at risk and their families has been developed at Meany. Through its involvement with the TIC Project, Meany Middle School has become a hub for interprofessional collaboration as representatives from school, health, and social service agencies meet to discuss service agreements and barriers to collaboration. These meetings are held in addition to weekly case management meetings.

As their second site, TIC Project coordinators chose the South Central School District/City of Tukwila. The school district already had a collaborative network in place, which consisted of the district itself, the city of Tukwila, the public health department, and many other local agencies and businesses.

Implementation

Because the TIC Project was envisioned as a 5-year project, it had laid the foundation for its program when it received AACTE/DeWitt Wallace-Reader's Digest Fund grant monies. In its first 2 years, TIC involved 12 faculty from the five participating professional schools and formed an advisory board with representatives from different professions, developed an initial curriculum, recruited 26 students from the five professional schools to participate in a full-credit course and field practicum.

The first year focused on designing the project and planning the initial curriculum on interprofessional collaboration. Implemented in the 1992-93 academic year, the TIC Project interprofessional curriculum placed preservice teachers at the participating community sites. Evaluation of the pilot year supported the notion that the classroom experience, in addition to the site-based learning activities, had significantly benefitted students. Students expressed enthusiasm about participating and working in real-life settings. The placements provided a framework for thinking in terms of interprofessional collaboration and exposed students, faculty, and practitioners from different professions to each other.

However, the pilot year experience showed that on-site collaboration does not occur spontaneously by simply placing students into a collaborative environment. The TIC Project revised its training model to require on-site interaction between participants and developed a Collaborative Cohort Model (CCM). Under this plan, students from the different participating disciplines were assigned to various cohort group sites such as the Mutual Partnership Coalition (MPC), a collaborative aimed at strengthening Seattle's urban community by building ties of mutual assistance among individuals and groups. At MPC, the recognition of individuals' gifts rather than their limitations is stressed. It emphasized mutual assistance relationships among seniors, between seniors and young persons, and among diverse racial and ethnic groups. Interns also had the opportunity to gain insight into real-life issues at the Minority Youth Health Project (MY Health), a community-based effort designed to prevent teen pregnancy, sexually transmitted diseases, violence, and substance abuse among African American, Asian American, Hispanic/Latino, and Native American youth. It was led by a faculty member and site-based practitioner, both from different disciplines, who monitored the students' learning activities.

The TIC interprofessional course is team-taught by participating faculty of the TIC Project. It is designed to teach collaborative skills, knowledge, and attitudes in the following areas: (1) collaborative practice, (2) intrapersonal well-being, (3) interpersonal effectiveness, (4) group process competence, (5) organizational expertise, and (6) community and sociocultural perspective.

The curriculum explores five conceptual frameworks for successful collaborative endeavors: (1) family/community-based support principles, (2) collaborative empowerment versus collaborative betterment, (3) various phases of collaboration, (4) focus on strengths and opportunities versus problems, and (5) constructive controversy.

In addition to the course work, each team identified a community project to work on a needs assessment. As a result, at the South Central School District, one cohort group created a Site Council to coordinate and manage an after school enrichment program, which also includes a mentorship program that matches 12th graders with 8th graders. Another cohort group assisted the Meany Middle School with its annual career fair and wrote a handbook for students exploring potential career choices. Throughout the course students were required to keep journals.

In the final two academic quarters, students, practitioners, supervisors, faculty and staff, and community members participated in communal learning sessions. Each session focused on a key issue of collaborative practice and incorporated relevant research literature. The objectives of these learning sessions were to (1) provide all participants with the conceptual frameworks and information base from which TIC projects and interns work; (2) draw on supervisors' expertise in support of the cohort projects and to elicit input into the project's understanding of collaboration, and (3) work jointly to develop future field experiences for interns. The TIC Project also added a reflective seminar component to the communal learning sessions to give students the opportunity to analyze on group processes and task progression.

Challenges and Successes

Throughout this project, which culminated in the formal listing of the Interprofessional Collaboration course in the catalogue of the Graduate School of Arts and Sciences after only 3 years, the TIC Project continuously and painstakingly performed both process and outcome evaluations of its activities. TIC Project staff documented, discussed, evaluated, and revised the project and curriculum components as they observed approximately 100 students who participated in the interprofessional collaboration experience. Ongoing documentation and evaluation have included detailed work plans and specific delivery time lines concerning the development and implementation of all TIC Project areas such as curriculum development, site development, practitioner competency, and evaluation. The

TIC Project has been exemplary in its use of research data to affect assessment and project accountability, yet another principle espoused by OERI and the AERA in *School-linked Comprehensive Services for Children and Families* (1995).

The TIC Project remains at the forefront of the reform movement to institutionalize interprofessional collaboration. It successfully engaged in interagency cooperation and coordinated the collaboration of five different schools within the University of Washington. The TIC Project has enjoyed support from within the university as well as across the nation and established strong ties with other higher education institutions and funding agencies. Furthermore, the newly developed TIC curriculum has planted the seed for curriculum review in the other participating professional schools.

In their first few months together, TIC planners discovered that they were speaking different languages, and had difficulties understanding each other's jargon. Like all other interdisciplinary groups, the project planners saw themselves confronted with the "terrible T's" involving turf (don't move in on my territory), tradition (in our field we have always done it this way), trust (do you really know what your are doing) and most important, time (is there really time for this?). Resulting friction, however, was overcome and participants' relationships were strengthened by holding regular retreats with an outside facilitator to meet these challenges.

But if I don't collaborate, I will only reach people like myself, or people that I can imagine. I won't tap into the needs, perspectives and wisdom of people different from me. If the problem or the solution has an impact on their lives, my wonderful solution might not work for them. It might even make matters worse.

(TIC participant, University of Washington)

There was also a logistical challenge of assembling students from the different participating disciplines for a common time for field site visits. The required number of hours also differed between schools. These challenges were overcome by meetings of representatives of all five schools and partnering community sites. The schedule incompatibilities were mastered by each representative making a schedule adjustment. As a result, common meeting times and locations were established.

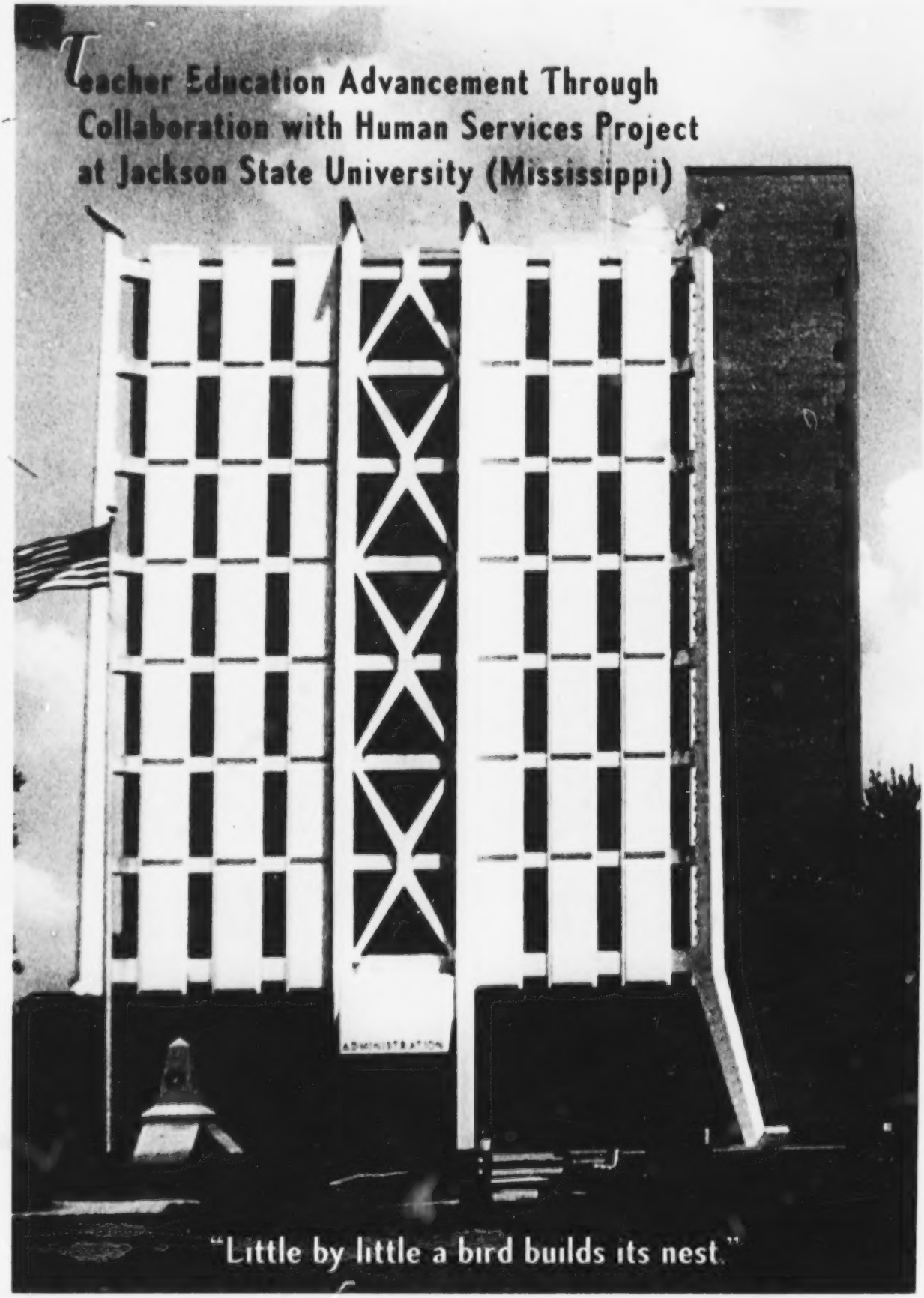
Lessons Learned

- Bringing together five professional schools with different curricular frameworks and requirements was especially challenging and time consuming for the project team. The length of practicum requirements varied significantly across schools, requiring TIC to creatively negotiate time arrangements.
- The task of identifying and clarifying a focus is especially difficult within an interprofessional group with each member mapping the terrain from within his or her disciplinary and institutional perspective. The resulting focus—on training, enhancing the collaborative capacity of sites, and developing new sites—was at first broad and inclusive, almost to the point of unmanageability. But faced with limited resources, the team now endeavors to synthesize its efforts into manageable components.
- The project team oscillated between more centralized arrangements and more decen-

tralized ones, discovering that the team could go too far in the direction of joint control to a point at which there is more sharing than leadership. The team eventually evolved specific mechanisms to strike a balance, among them, an ongoing roster of decisions made and actions taken, regular steering committee meetings, and interlocking tasks group membership.

- The sheer amount of communication necessary to maintain an interprofessional enterprise and the delicate nature of this communication took project team members by surprise. The team had to learn to acknowledge differences in professional perspective, as well as power and status differences, which arose as faculty, staff, students, and practitioners worked together. In arriving at this point, the team discovered that interprofessional communication places a high premium on time, accessibility, and predictability.
- The project team had the challenge of operationalizing an ambitious agenda while trying to keep complex organizational structures, interaction, and negotiation among players in manageable forms. The project team found that such structures have to evolve, and they do so slowly.
- For all members of the team, but especially for the university faculty, the project demanded revisiting the more traditional view of faculty as the autonomous intellectual entrepreneur, imparting expertise to novices, and renegotiated an environment more conducive to collaborative interactions.
- Two mechanisms for reflecting on the project's progress—retreats and periodic feedback from the evaluation team—provided an invaluable means of ongoing and informal reflective conversation that occurred in and out of Steering Committee meetings. No matter how difficult it may be to find the time for group reflection, it must be included in the process.

It is fascinating to see how organized and articulate the public affairs students are. We all learn in such different ways. I am enjoying observing and experiencing the process itself and am okay with the tension that these different styles present.
(TIC participant, University of Washington)


Teacher Education Advancement Through
Collaboration with Human Services Project
at Jackson State University (Mississippi)
"Little by little a bird builds its nest."

BEST COPY AVAILABLE

Project Teach *prepares and trains teachers to become knowledgeable of the services offered by public and private human and social services agencies by incorporating interprofessional internships into the education curriculum. Through Project Teach, Jackson State University's School of Education collaborates with the School of Science and Technology, the School of Liberal Arts, the Jackson County Public Schools, Hinds County Public Schools, parents, and social services agencies to mount a concerted, collaborative, and sustained effort to improve the lives of children, youth, and their families.*

Participating agencies include Mississippi Families as Allies (for children with emotional or behavioral difficulties); the Mississippi State Department of Health; the Reach Out Foundation (for children with disabilities); the Urban League of Jackson, Inc;, the Hinds County Youth Court; and the ARK (Addicted, Rehabilitated Kids) of the Mississippi Children's Home and Family Service Association.

Project Teach is characterized by six core objectives: (1) to strengthen the Teacher Education Program at Jackson State University and Hinds County and Jackson Public Schools by utilizing other professional agencies and academic departments' input into the teacher education curricula, (2) to serve as a clearinghouse for information regarding teacher education in the state of Mississippi, (3) to develop an interagency and interdepartmental involvement model among members of the partnership and the School of Liberal Arts for participation in the modification of the teacher education program, (4) to examine alternative models and structures for professional teacher preparation, (5) to modify structure and content of the current teacher education curricula, and (6) to provide 100 percent placement of teacher education majors into human and social service agencies for clinical field experiences.

Setting and Background

Project Teach is located at Jackson State University, the sixth largest among the nation's 114 historically Black colleges and universities (HBCU). Jackson State University has traditionally been an important resource to the Black communities in Mississippi. Of the university's total enrollment of 6,700 students, nearly 85 percent are African Americans, 10 percent are White, and 5 percent are international students. Although a high percentage of the students come from within a 50-mile radius of the university, 81 of Mississippi's 82 counties are represented along with 37 other states and 13 foreign countries.

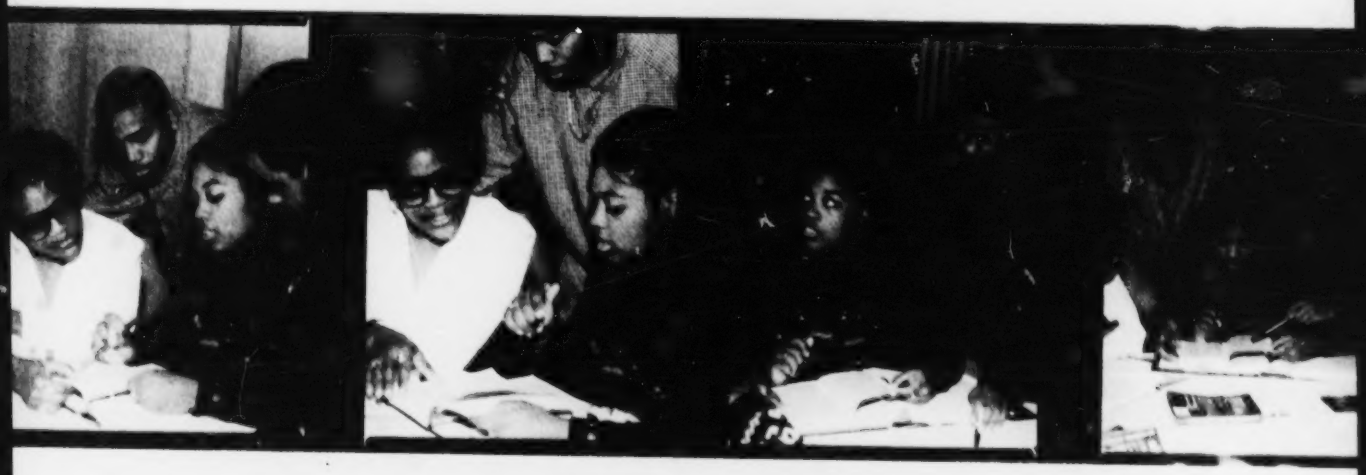
Community Sites

The city of Jackson is the largest urban area in Mississippi. Even though it does not compare to the size of other major urban centers, Jackson's urban education problems mirror those found in other cities. Of approximately 500,000 K-12 students in Mississippi, over 8 percent were retained, at least 35 percent dropped out of school, and 70 percent are eligible for free or reduced lunches. Eighteen percent of children failing at least one grade were in first grade. School attendance for 1988-89 shows that approximately 47 percent of the youth in grades 1-6 and 32 percent in grades 7-12 were seen by attendance officers. The community sites for Project Teach are the Hinds County and the Jackson Municipal Separate School districts.

Implementation

Project Teach developed the following components to attain its objectives:

- Preservice Teacher Education Internship—an internship requirement for students in the School of Education. Teacher education majors are required to spend one semester in each of their sophomore and junior years in participating agencies gaining clinical field experience.
- Master Teacher In-Service Workshops/ Seminars—workshops for practicing teachers to enhance their classroom skills and knowledge base in the areas of human and social services.



- Clearinghouse Network and Dissemination—a service for sharing information on teacher education in the state of Mississippi.
- Collaboration of Human/Social Services—utilization of professional agencies to strengthen teachers' abilities to address the complexity and volume of problems students bring to school with them.
- Interagency/Intradepartmental Involvement—the collaboration of schools and families with human and social services agencies and Jackson State University to promote comprehensive improvements in the education of urban and rural students.
- Curriculum Modification—inclusion of more preservice counseling and clinical field experiences in the curriculum for future teachers.

To carry out the project components, Project TEACH staff assembled various teams: training teams, local site teams, curricula revision teams, intern teams, and field monitoring teams. The teams, including a representative from a human service agency, teacher education faculty, classroom teacher, human service faculty at Jackson State University, and a parent from a participating school, participated in workshops to prepare them for the work with the participating community sites. This team in turn trained local site teams to become knowledgeable of the services offered in the participating agencies. These teams identified the community sites' specific needs and presented in-school seminars and workshops. They worked with school staff to identify their concerns, worked with support staff to improve the learning climate of the school, and worked with preservice interns in their professional development and practical experiences. Each local site team is comprised of an administrator, a teacher, the counselor, and at least one parent.

The curriculum revision team, located in the School of Education at Jackson State University, includes the director of student teaching, a faculty member from a human services discipline, an undergraduate, and a graduate student. This team is responsible for conducting similar workshops within the academy with teacher education faculty and preservice students to spearhead curricula revisions. The field monitoring team observed all activities, including those of the intern teams.

Under this component, as of January 1995, Project TEACH placed 145 interns at participating agencies. Each student was assigned to a human or social service agency or a counseling or mental health agency. Interns completed 24 contact hours per person per 8-week semester. During their internships, student teachers gained insights into the many problems children and youth may face including babies and toddlers with severe disabilities, a 10th grader embarrassed that he could not read, teenage mothers, drug- and alcohol-addicted children, youth with sexually transmitted diseases, and incarcerated youth, among others.

Challenges and Successes

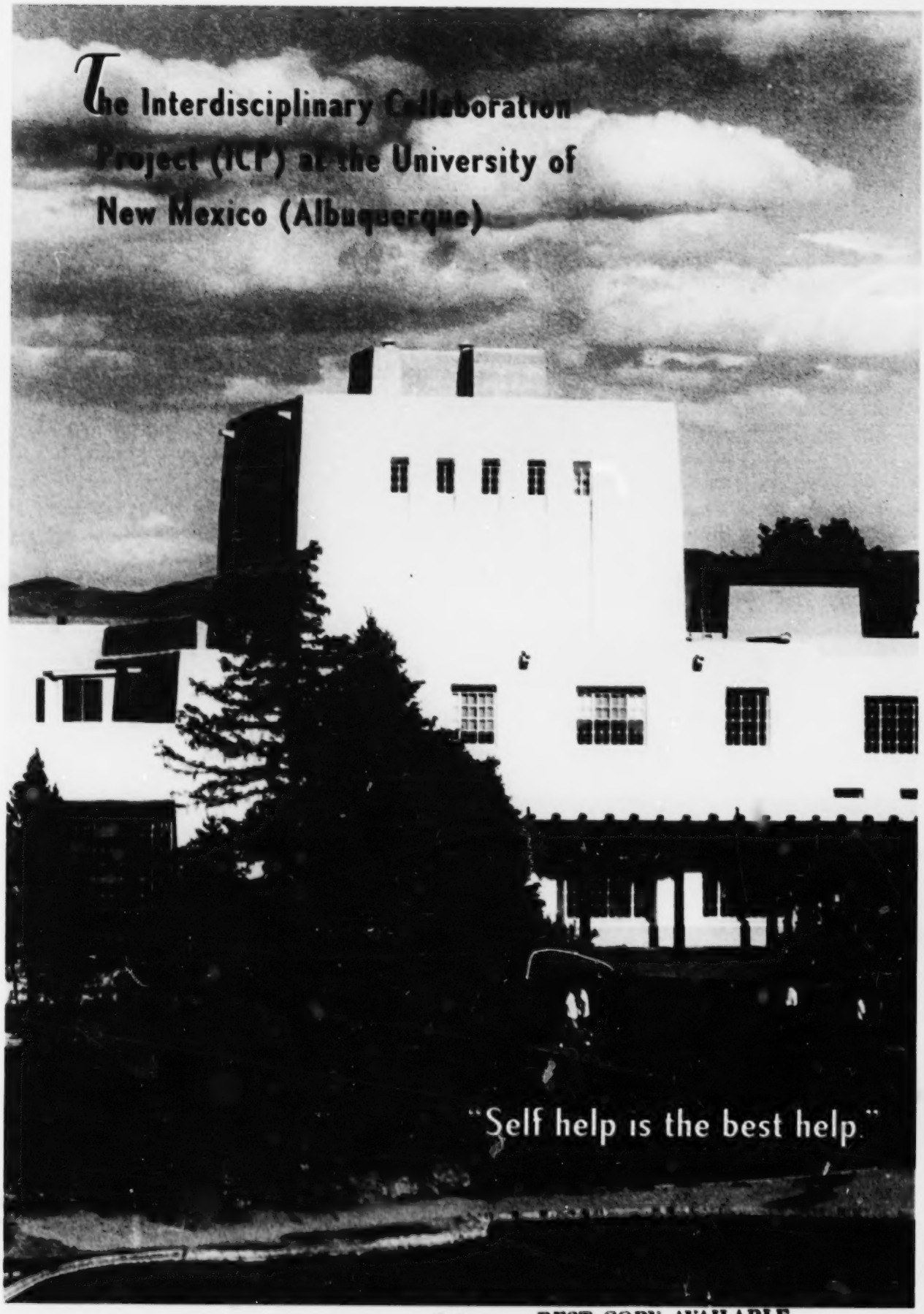
Project TEACH's success can be attributed to a variety of factors. In implementing the project, staff shared ownership with social service agency professionals, teachers, and parents in the community. It instituted an advisory board, which connected the efforts of the university with schools, the local communities, the participating professionals, and the clients. Overall, Project TEACH has managed 145 interns, over 50 social/human services agencies, and a multitude of advisors and supervisors. Project TEACH's success in having an impact on the community has been substantially aided by Jackson State University's strong community linkages. Its well-grounded connections with participating agencies facilitated Project TEACH in placing its many interns efficiently. Preexisting relationships, many of which are the result of professional and personal relationships as well as the support of Jackson State University's alumni (many of whom live and practice in Jackson), account for much of its networking success. As a result of the strong networking base and exemplary focus on community outcomes, the Jackson Public Schools incorporated Project TEACH into the school systems without any substantial bureaucratic barriers. This strategy, as well as its outcome, illustrates the basic principle established by OERI and the AERA (1995), to allow local needs and commitment to determine the shape of the collaborative system.

Project TEACH has provided preservice teachers with 24 hours of field-based clinical experience and increased their awareness of the services these agencies provide to children, youth, and families. Preservice teachers have had the opportunity to be exposed to two interprofessional and interdisciplinary seminars per semester strengthening their collaborative problem-solving skills. Due to campus lobbying efforts by project staff, it is now mandatory that all education majors complete 100 field hours prior to their traditional year of student teaching. In addition, a sophomore course, which also places teacher education students at human service agencies, was added to the already existing junior-level course. As a result, the number of students served by Project TEACH more than doubled.

Project TEACH students were originally required to conduct field work at three and then at two different agencies in one semester, in an effort to give students diverse experiences. This did not allow adequate time for students to acclimate to their agency environments, and most importantly, to build relationships with the youth or agency personnel. Students are now required to conduct field work at one site, which has served them, as well as the coordinating staff, better. During the first year of the project many students had difficulties acquiring transportation to and from the agency sites. A partnering system was established, where a driving student was coupled with a nondriving student, both of whom conducted their field work at the same agency.

Lessons Learned

- University alumnae, considering the number in place at varying agencies, can serve as principle catalysts in securing cooperative human/social agency sites.
- Constant and open communication is vital to the establishment and maintenance of collaborative ventures, among teacher training institutions, public school personnel, and social service professionals.
- Significant consideration should be given to the logistical realities of matching students with agency sites.
- Transportation costs or car pooling strategies must be supported.
- Overly ambitious goals, such as requiring students to intern at more than one agency per semester, can diminish rather than advance project momentum.


The Interdisciplinary Collaboration Project (ICP) at the University of New Mexico (Albuquerque)
"Self help is the best help."

BEST COPY AVAILABLE

***The Interdisciplinary Collaboration Project** at the College of Education at the University of New Mexico has sought to encourage education, government, and social services organizations to support the healthy development of children and families. Funding from AACTE/DeWitt Wallace-Reader's Digest Fund enabled this project to build upon already existing collaborative efforts of the University of New Mexico; the Albuquerque Public Schools; the New Mexico Department of Children, Youth and Families; and other community-based organizations. Established as a cabinet-level department in New Mexico's state government in 1992, the New Mexico Department of Children, Youth and Families has strongly supported ICP in its mission to promote the healthy development of children and youth.*

The project's main objective has been to develop and implement an interprofessional collaboration education program for inservice and preservice professionals from education, health, and human services. ICP project goals have included the following:

- *develop and pilot-test an interprofessional collaboration curriculum (content) and pedagogy (approach and philosophy) for inservice and preservice preparation programs in teacher education, family studies, counseling, and health education;*
- *integrate and institutionalize such components into the preparation programs of said disciplines; and*
- *support interdisciplinary administrative and academic structures within the College of Education at the University of New Mexico.*

Setting and Background

The University of New Mexico, located in Albuquerque, prepares the majority of teachers for Albuquerque Public Schools District. The Albuquerque Public Schools serve more than 85,000 students, which is about 28 percent of the school-age students in the state.

New Mexico, the fifth largest state in the U.S., has a per capita income that ranks 47th in the nation and one in seven families in New Mexico has an income below the poverty level, nearly twice the national average. Among New Mexico's Native American population 44 percent live in poverty. Among the Hispanic 23 percent live in poverty. The ethnic diversity in New Mexico is also apparent in its schools. In 1990-91 New Mexico State Department of Education student enrollment data showed 45 percent Hispanic, 42 percent non-Hispanic White, 10 percent Native American, 2 percent African American, and less than 1 percent of Asian/Pacific Islander students. Within the state of New Mexico, at least seven different Native American languages and several regional Spanish dialects are spoken, which make intertribal and interregional communication challenging.

Community Sites

The participating schools in ICP are Emerson Elementary School, Van Buren Middle School, and Highland High School, all of which experience an average daily absenteeism rate between 7 and 8 percent. In 1990-91 the mobility rate at which students moved into or out of the geographic area served by these schools ranged between 69.8 percent at the high school to 60.6 percent at the middle school and 81.8 percent at the elementary school. The majority of these students come from low-income or no-income, single-parent families.

Implementation

The Interdisciplinary Collaborative Project has three components: Interprofessional Field Experience, Field Experience Debriefing, and Practices Class. The field experience affords inservice and preservice professionals from various disciplines the opportunity to work and learn about each others' working environments. For 4 hours a week student teachers can elect to participate in community agency programs and students of community health, counseling, and family studies can work in public schools as part of their regular course requirements. Inservice professionals can gain crossprofessional experience by spending 2 to 4 days in preselected sites. Emerson

Elementary inservice teachers, for example, were able to select such an experience for half a day per week on paid release time. At the middle school, interns have designed and delivered a life skills class as well as initiated a sibling caretaker program, where older siblings no longer needed to take care of their younger siblings after school. They also set up a truancy mediation program at the participating high school and delivered a self-esteem class at the elementary school.

The Interprofessional Debriefing Component serves as a forum for in- and preservice participants to discuss and collaboratively develop solutions for field-based problems they experience.

The Interprofessional Practices Class aims for students to develop and practice the principles, values, strategies, and skills necessary for carrying out interprofessional collaboration in a variety of settings. The curriculum is developed by the class participants, according to their most relevant needs. The course materials cover areas such as child development, interdisciplinary collaboration, needs assessment, group processes, cross-cultural issues, and organizational analysis.

Challenges and Successes

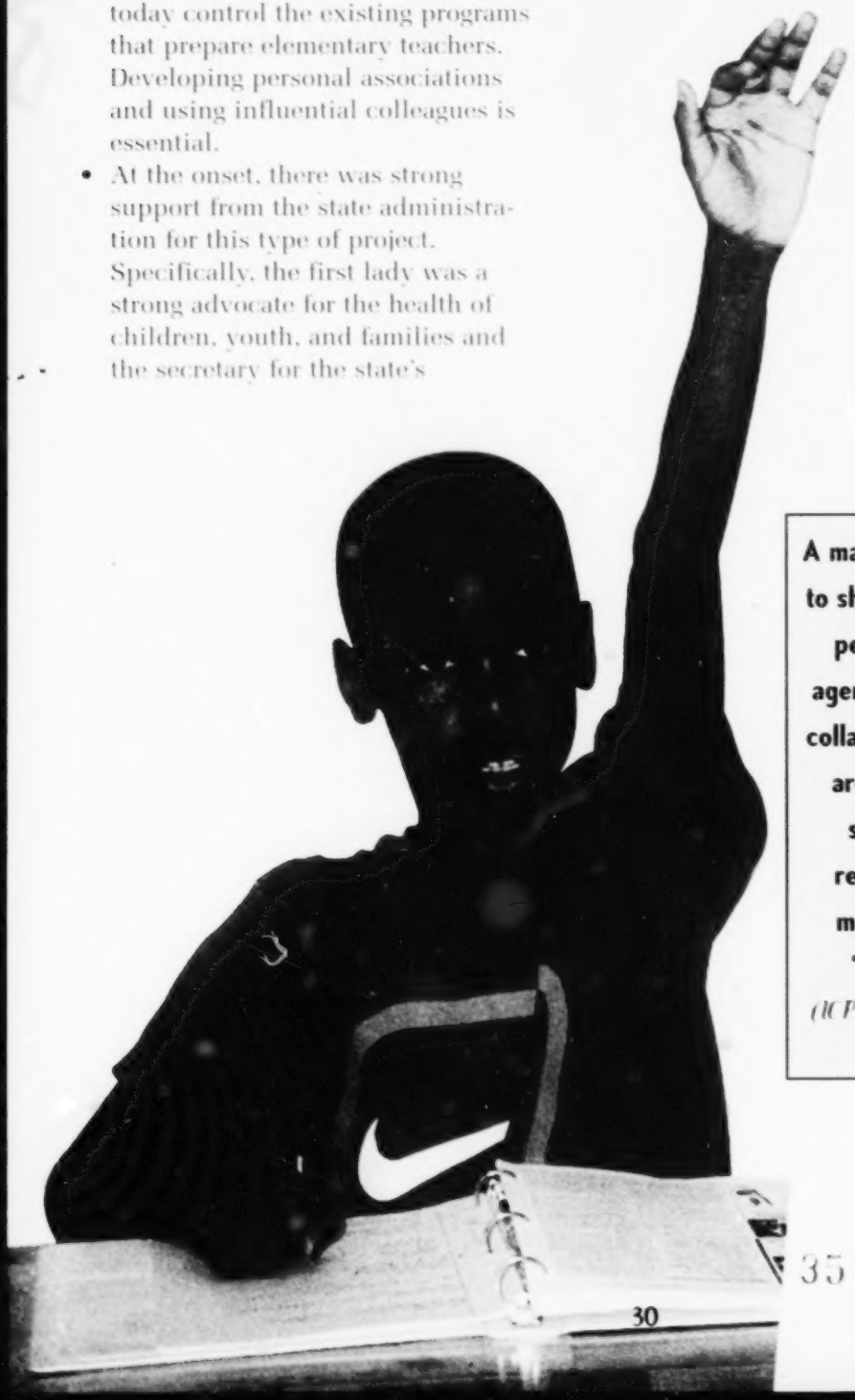
The Intercollaboration Project at the University of New Mexico successfully influenced policy formulation at state and local levels. ICP connected its goals with those of the former governor of New Mexico and managed to forge links between itself and the state-mandated agency for Children, Youth and Families and other organizations such as the Centers for Disease Control.

Supported significantly by the state and encouraged by an extensive restructuring of the university's College of Education, ICP successfully increased the acceptance of the interprofessional concept and developed, implemented, and institutionalized an interprofessional collaboration course. Outside the College of Education, other colleges recognize a place for the expansion of their own professions within the College of Education restructuring design. As a result, the School of Nursing is a very closely linked unit. Its students now take the interprofessional classes offered at the College of Education as a component of their field training.

Throughout the implementation of the project, ICP staff had to struggle with existing organizational policies and practices at the local schools and within the College of Education, which impeded ICP staff from effecting change as rapidly as it had envisioned. Project staff managed to lower the level of resistance because their efforts were supported by state reform and the restructuring within the College of Education, which focused upon reforming the service delivery to children, youth, and families.

Lessons Learned

- Changing the environment of a university and college of education is a long-term goal requiring constant effort. There is no quick progress or lasting product.
- Influencing the preparation of elementary teachers in this College of Education is extremely difficult. There are those faculty who have developed extensive influence over the past 20 years and today control the existing programs that prepare elementary teachers. Developing personal associations and using influential colleagues is essential.
- At the onset, there was strong support from the state administration for this type of project. Specifically, the first lady was a strong advocate for the health of children, youth, and families and the secretary for the state's Children, Youth, and Families Department was a strong supporter of collaborative efforts to serve children. Since that time, the administration and conditions have changed. This indicates the propriety of maximizing political support when it is necessary and at the same time recognizing that this support base is likely temporary.



A major barrier is an inability to share power. It seems as if people from schools and agencies talk about "making collaboration work," but then are not willing or able to share their power and resources with others to make it happen...It's the "this is my turf" rule.

(ICP participant, University of New Mexico)

Bibliography

American Academy of Pediatrics (et al.). (1994). *Final report of the national consensus building conference on school-linked integrated service systems.* Washington, DC: Author

American Medical Association, & National Association of State Boards of Education. (1990). *Code blue: Uniting for healthier youth.* Washington, DC: Author.

Annie E. Casey Foundation. (1994). *Kids count data book.* Greenwich, CT: Author.

Brellochs, C., & Fothergill, K. (1993, December). *Special report: Defining school-based health center services.* A report prepared for the Centers for Disease Control and The Carnegie Corporation of New York. New York, NY: School Health Policy Initiative, Center for Population and Family Health, and Columbia University School of Public Health.

Center on Organization and Restructuring of Schools. (1993 Fall). School-community collaboration: Comparing three initiatives. In *Brief to Policymakers.* Madison, WI: Author.

Cohen, D. K., McLaughlin, M. W., & Talbert, J. E. (Eds.). (1993). *Teaching for understanding: Challenges for policy and practice.* San Francisco: Jossey-Bass.

Committee for Economic Development. (1994). *Putting learning first: Governing and managing the schools for high achievement.* An executive summary of a statement by the research and policy committee of the Committee for Economic Development. New York, NY: Author.

Dilworth, M. E. (1990). *Reading between the lines: Teachers and their racial/ethnic cultures.* Washington, DC: American Association of Colleges for Teacher Education and the ERIC Clearinghouse on Teacher Education

Dryfoos, J.G. (1990). *Adolescents at risk.* San Francisco: Jossey-Bass Inc.

Dryfoos, J.G. (1994). *Full-service schools: A revolution in health and social services.* San Francisco: Jossey-Bass.

Education Commission of the States. (1993, July). *What communities should know and be able to do about education.* Denver, CO: Author.

Gerry, M. & Morrill, W. (1994, Fall). Integrating the delivery of services to school-aged children at risk: Toward a description of American experience and experimentation. In: *The Octopus Times,* Vol. 1. Washington, DC: Institute for Educational Leadership.

Goodlad, J. I. (1990). *Teachers for our nation's schools.* San Francisco, CA: Jossey-Bass.

Lawson, H.A. & Hooper-Briar, K. (1994). *Serving children, youth and families through interprofessional collaboration and service integration: A framework for action.* Oxford, OH: Danforth Foundation and the Institute for Educational Renewal at Miami University.

Hooper-Briar, K., & Lawson, H.A. (1994). *Expanding partnerships: Involving colleges and universities in interprofessional collaboration and service integration.* Oxford, OH: Danforth Foundation and the Institute for Educational Renewal at Miami University.

Institute for Educational Leadership. (1994). *Linking schools with health and social services.* Perspectives from Thomas Payzant on San Diego's new beginnings. Special report No.2. Washington, DC: Author.

Institute for Family-Centered Care. (1995, Spring). Making systems work. Statewide initiatives seek to broaden service delivery. In: *Advances in Family-Centered Care.* Vol. 1., No. 1. Bethesda, MD: Author.

Institute for Responsive Education. (1993, November). *Whole child. Whole community.* Boston, MA: Author.

Kirst, M.W. (1990, April). *Improving children's services: Overcoming barriers, creating new opportunities.* Paper presented at the annual meeting of the American Educational Research Association, Boston, MA.

Levin, R.A. (Ed.). (1994). *Greater than the sum: Professionals in a comprehensive services model* (Teacher Education Monograph No. 17).Washington, DC: ERIC Clearinghouse on Teacher Education.

Mason, J.O. (1990, January). Forging working partnerships for school health education. *Journal of School Health, 59(1),* 18-20.

McLaughlin, R.T. (Ed.). (1987, May). *Proceedings of the first national leadership symposium on interprofessional education and practice.* Airlie, VA: National Consortium on Interprofessional Education and Practice.

National Commission on Children. (1991). *Beyond rhetoric: A new American agenda for children and families.* Washington, DC: Author.

National Health & Education Consortium. (1995). *Putting children first: State-level collaboration between education and health*. Washington, DC: Author.

Office of Educational Research and Improvement, & American Educational Research Association (1995). *School-linked Comprehensive Services for Children and Families*. Washington, DC: Author.

Office of Educational Research and Improvement, American Educational Research Association, National Center on Education in the Inner Cities, & American Association of Colleges for Teacher Education (1994). *An invitational conference on school-linked comprehensive services for children and families. Conference agenda & proceedings:* Washington, DC: Authors.

Office of Technology Assessment, U.S. Congress. (1991B). *Adolescent health*. Vol. 1: *Summary and policy options*. Washington, DC: U.S. Government Printing Office, OTA-H-468.

Office of Technology Assessment, U.S. Congress. (1991). *Adolescent health*. Vol. 3: *Crosscutting issues in the delivery of health and related services*. Washington, DC: U.S. Government Printing Office, OTA-H-468.

Schwartz, H. S. (Ed.). (1990). *Collaboration: Building common agendas* (Teacher Education Monograph No. 10). Washington, DC: ERIC Clearinghouse on Teacher Education.

U.S. Bureau of the Census. (1994). *Children living with married couples*. Washington, DC: U.S. Government Printing Office, CD94-14.

U.S. Department of Education. (1994). *An idea book: Implementing school-wide projects*. Washington, DC: Author.

U.S. Department of Education, & U.S. Department of Health & Human Services. (1993, April) *Together we can. A guide for crafting a profamily system of education and human services*. Washington, DC: Author.

U.S. General Accounting Office. (1993). *School-linked human services. A comprehensive strategy for aiding students at risk of school failure*. A report to the chairman, Committee on Labor and Human Resources, U.S. Senate. Washington, DC: Author.

Welch, M., & Sheridan, S.M. (1995). *Educational partnerships: Serving students at risk*. Orlando, FL: Harcourt Brace & Company.

W.K. Kellogg Foundation. (1995). *Joining forces: Strengthening the circle of caring communities for children*. Battle Creek, MI: Author.

Teach a child to fish, feed him for a lifetime. Hold fast your dreams... The early bird catches the worms... If you love life do not squander time, for time is the stuff life is made of ... Early to bed and early to rise makes one healthy, wealthy, and wise... Bless the child that's got her own... A bird in the hand is worth two in the bush... A word to the wise is sufficient... Self help is the best help... A penny saved is a penny earned... Pretty is as pretty does! An ounce of prevention is worth a pound of cure... Look before you leap... Know what you are getting into... To be a great champion you must believe you are the best; if you're not, pretend you are... Honor cannot be bought... Honor the laws of nature & the laws of man. Well done is better than well said... Keep conscience clear, then never fear. Don't put off tomorrow what you can do today. A spoonful of honey will catch more flies than a gallon of vinegar. Pay what you owe and what you are worth you will know. Neither a borrower nor lender be. Hide not your talents, they for use were made. For what's a sundial in the shade. An apple a day... Genius without education is like silver in the mine. Little by little a bird builds its nest... It takes a whole village to raise a child... Enjoy a brave new fantastic point of view... Keep your eye on the prize. He that has a trade has an estate... If passion [illegible] the reins. Glass and reputations are eas[illegible] well mended. Sell not virtue to purity[illegible] y to purchase power... Anything worth[illegible] No matter what the accomplishmen[illegible] u! When you clench your fist, n[illegible] our hand, nor can your hand pick u[illegible] door closes, another door opens. Behin[illegible] is a silver lining. Do not look at the [illegible] the glass is actually half full! Self[illegible] Live and watch how life can triumph[illegible] rson does not mean taking advantage[illegible] e! Knowledge is power! People will know you are serious when you produce. Love without esteem cannot go far or reach high; it is angel with only one wing. Anticipate the good so that you may enjoy one wing. Anticipate the g[illegible] so that you may enjoy it

Comprehensive Teacher Education:

A Handbook of Knowledge

AMERICAN ASSOCIATION OF COLLEGES FOR TEACHER EDUCATION

&

THE DEWITT WALLACE-READER'S DIGEST FUND